

**LOS GATOS – MONTE SERENO
COMMUNITY EMERGENCY RESPONSE TEAM [CERT]
REGISTRATION FORM**

I would like to register for the upcoming CERT training course:

_____ Summer2004* _____ Autumn2004**

Name: _____

Phone (Home): _____ (Work): _____

Address: _____ Zip Code: _____
(Street, Town, City)

E-Mail Address (at which you want to receive CERT information):

Please Mail this form to:

CERT Program Office
Los Gatos/Monte Sereno Police Department
PO Box 973, Los Gatos, CA 95031

Or Fax to: (408) 399-5710

By returning this form, I agree to participate in the complete 20-hour Los Gatos/Monte Sereno Community Emergency Response Team training course. I understand that only those who attend all classroom sessions and the hands-on training session will receive a CERT vest, hard hat, and graduation certificate.

Signature of Applicant

Date

If you have questions about the CERT program or need more information, please call the CERT office at (408) 399-5722.

*SUMMER – Tue, Jul 13, 20, 27, Aug 3, 10 [7--10 pm] & Sat, Aug 14 [8-12 am]

**AUTUMN -- Tue, Sep 14, 21, 28, Oct 5, 12 [7--10 pm] & Sat, Oct 16 [8-12 am]